

**FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

10534210  
APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19	1					
20						
21						
22						
23						
24						
25						
26						
27						
28	1					
29						
30						
31						
32						
33						
34						
35						
36						
37						
38						
39						
40	1		1			
41						
42	1					
43						
44						
45	1					
46	1					
47						
48						
49	1		1			
50						
TOTAL IND.		↓		↓		↓
TOTAL DEP.	←		←		←	
TOTAL CLAIMS						

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
55						
56						
57						
58	1					
59						
60						
61						
62						
63						
64						
65						
66						
67						
68						
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93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.		↓	5	↓		↓
TOTAL DEP.	←		76	←		←
TOTAL CLAIMS			81			

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